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United States of America SMALL BUSINESS ADMINISTRATION

Please Read Carefully - Print or Type

Each member of the small business or the development company requesting assistance must submit this form in TRIPLICATE for filing with the SBA application. This form must be filled out and submitted by:

	SWALL BUSIN	NESS ADMINISTRATION	1. By the proprietor, if a sole proprietorsh	ıp.		
STATEMENT OF PERSONAL HISTORY			2. By each partner, if a partnership.			
'WISTRA'			3. By each officer, director, and additionally by each holder of 20% or more of the ownership stock, if a corporation, limited liability company, or a development company.			
Name and Address of Applicant (Firm Name)(Street, City, State, and ZIP Code)			SBA District/Disaster Area Office		y,	
			Amount Applied for (when applicable)	File No. (if kn	own)	
 Personal Statement of: (State name in full, if no middle name, state (NMN), or if initial only, indicate initial.) List all former names used, and dates each name was used. Use separate sheet if necessary. 			Name and Address of participating lender	or surety co. (when applicable and known)	
	First Middle	Last				
			2. Date of Birth (Month, day, and year)			
			Place of Birth: (City & State or Foreign	Country)		
4.	Give the percentage of ownership or stock ow	ned or Social Security No.				
	to be owned in the small business or the development company		U.S. Citizen? YES NO If no, give alien registration number:			
5	· · · ·			Most recent prior address (omit if over 10 years ago):		
From: From:				years ago).		
	To:	To: Address:				
	Address:					
	Home Telephone No. (Include A/C):					
DI	Business Telephone No. (Include A/C): EASE SEE REVERSE SIDE FOR EXPLA	ANATION DECARDING DISCLOSU	DE OF INFORMATION AND THE HE	ES OF SUCH	INFORMATION	
IF MI	IS IMPORTANT THAT THE NEXT THE CESSARILY DISQUALIFY YOU; HOWE YOU ANSWER "YES" TO 6, 7, OR 8, F SDEMEANOR OR FELONY, DATES OF ERTINENT INFORMATION.	VER, AN UNTRUTHFUL ANSWER URNISH DETAILS ON A SEPARA	WILL CAUSE YOUR APPLICATION TE SHEET. INCLUDE DATES, LOCA	TO BE DENIE	ED. ES, SENTENCES, WHETHER	
6.	Are you presently under indictment, on parole	or probation?				
	Yes No (If yes, inc	licate date parole or probation is to expire	e.)			
7.	7. Have you ever been charged with and or arrested for any criminal offense other than a minor motor vehicle violation? Include offenses which have been dismissed, discharged, or not prosecuted (All arrests and charges must be disclosed and explained on an attached sheet.)					
	Yes No					
8.	Have you <u>ever</u> been convicted, placed on preti a minor vehicle violation?	rial diversion, or placed on any form of pro	obation, including adjudication withheld pen	ding probation	, for any criminal offense other than	
	Yes No					
9. c	authorize the Small Business Administration Cletermining my eligibility for programs authorize	Office of Inspector General to request crined by the Small Business Act, and the Sm	ninal record information about me from crir nall Business Investment Act.	ninal justice ag	gencies for the purpose of	
sur	UTION: Knowingly making a false statement of ety bond, or other program participation. A fall der 15 USC 645 by imprisonment of not more brisonment of not more than thirty years and/or	se statement is punishable under 18 US than two years and/or a fine of not mor	C 1001 by imprisonment of not more than f	five years and/o	or a fine of not more than \$10,000;	
Sig	nature	Title			Date	
Αg	ency Use Only		1		l	
10.	Fingerprints Waived Date	Approving Authority	11. Cleared for Processing	Date	Approving Authority	
	Fingerprints Required Date	Approving Authority	Request a Character Evaluation	Date	Approving Authority	

PLEASE NOTE: The estimated burden for completing this form is 15 minutes per response. You are not required to respond to any collection of information unless it displays a currently valid OMB approval number. Comments on the burden should be sent to U.S. Small Business Administration, Chief, AlB, 409 3rd St., S.W., Washington D.C. 20416 and Desk Officer for the Small Business Administration, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503. OMB Approval 3245-0178. PLEASE DO NOT SEND FORMS TO OMB.

Date Sent to OIG

NOTICES REQUIRED BY LAW

The following is a brief summary of the laws applicable to this solicitation of information.

Paperwork Reduction Act (44 U.S.C. Chapter 35)

SBA is collecting the information on this form to make a character and credit eligibility decision to fund or deny you a loan or other form of assistance. The information is required in order for SBA to have sufficient information to determine whether to provide you with the requested assistance. The information collected may be checked against criminal history indices of the Federal Bureau of Investigation.

Privacy Act (5 U.S.C. § 552a)

Any person can request to see or get copies of any personal information that SBA has in his or her file, when that file is retrievable by individual identifiers, such as name or social security numbers. Requests for information about another party may be denied unless SBA has the written permission of the individual to release the information to the requestor or unless the information is subject to disclosure under the Freedom of Information Act.

Under the provisions of the Privacy Act, you are not required to provide your social security number. Failure to provide your social security number may not affect any right, benefit or privilege to which you are entitled. Disclosures of name and other personal identifiers are, however, required for a benefit, as SBA requires an individual seeking assistance from SBA to provide it with sufficient information for it to make a character determination. In determining whether an individual is of good character, SBA considers the person's integrity, candor, and disposition toward criminal actions. In making loans pursuant to section 7(a)(6) the Small Business Act (the Act), 15 USC § 636 (a)(6), SBA is required to have reasonable assurance that the loan is of sound value and will be repaid or that it is in the best interest of the Government to grant the assistance requested. Additionally, SBA is specifically authorized to verify your criminal history, or lack thereof, pursuant to section 7(a)(1)(B), 15 USC § 636(a)(1)(B). Further, for all forms of assistance, SBA is authorized to make all investigations necessary to ensure that a person has not engaged in acts that violate or will violate the Act or the Small Business Investment Act,15 USC §§ 634(b)(11) and 687b(a). For these purposes, you are asked to voluntarily provide your social security number to assist SBA in making a character determination and to distinguish you from other individuals with the same or similar name or other personal identifier.

When this information indicates a violation or potential violation of law, whether civil, criminal, or administrative in nature, SBA may refer it to the appropriate agency, whether Federal, State, local, or foreign, charged with responsibility for or otherwise involved in investigation, prosecution, enforcement or prevention of such violations. See 56 Fed. Reg. 8020 (1991) for other published routine uses.